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A Multidisciplinary Approach to Contain COVID-19 in Sierra Leone

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- To raise awareness on key issues in West Africa;
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- To proffer recommendations on civil society involvement in advocacy;
- To provide recommendations to policy makers.

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Introduction

On April 11, the Republic of Sierra Leone marked the start of a fourteen days inter-district lockdown (from 11 to 24 April 2020) to combat the spread of the COVID-19 (Coronavirus) pandemic in the country.

The fourteen days inter-district lockdown is a significant milestone. It refers to the incubation period – 14 days – of the virus, as stipulated by the World Health Organization. If Sierra Leoneans show the maximum compliance to all social distancing regulations, it will be a remarkable turnaround for the Republic of Sierra Leone and a testament to the bravery and dedication of health workers, some of whom have been infected with the virus while treating the sick.

Sierra Leone as of Friday, 17 April 2020 has recorded 26 confirmed cases of COVID-19 with a total of 531 in mandatory quarantine homes. This number keeps rising. The very first Coronavirus case was documented in Sierra Leone on 31 March and it involved a 37-year-old man who arrived in the country from France on an Air Brussels flight on the 16 March. Once she tested positive, she was immediately put into quarantine.

It is prudent that the government has introduced social-distancing rules of varying strictness to combat the spread of COVID-19 pandemic, but, the question of how long these measures should

remain in place has sparked vigorous debate. Many economists and psychologists have warned that a lengthy period of de facto home detention will damage people's financial and mental health, while epidemiologists argue that maintaining lockdowns will help to flatten the contagion curve more quickly. Policymakers designing measures to inform the countries' response to COVID-19 would have to take both views into account – a challenging dilemma and dire reality!

Luckily, there is substantial evidence from the three-day national lockdown (from 4 to 6 April 2020) regarding citizens' compliance with government regulations. For starters, people need to know and understand the rules in order to obey them. And if citizens think that a rule could potentially cause them material or non-material harm, they will be less willing to comply. This substantiates why governments sometimes use economic incentives or penalties to promote compliance. It is not very clear if this is the case in the Sierra Leonean context.

But a carrot-and-stick approach will not work unless the target population is actually able to comply. And the unprecedented lockdown in response to the COVID-19 pandemic – with measures ranging from voluntary self-isolation to possible fines or jail terms for those breaking the rules – are a major test of the extent to which the entire populations can adhere to strict government measures.



1- Lockdown: A multidisciplinary approach

After all, confining people to their homes is a legal form of incarceration in many countries including in Sierra Leone and has been since antiquity. According to the [Independent](#), UK's largest news brand, already, tens of thousands have violated lockdown instructions in France, England, Russia, Italy, Spain, prompting governments to introduce heavier and sometimes constitutional penalties. For instance, [Independent](#) additionally reported that Italy alone has charged over 100,000 people for breaking lockdown rules with tougher

sanctions. But while most people are willing to adhere to social-distancing rules for a short period, mounting financial and mental pressures will ultimately erode their compliance.

So, if policymakers want to ensure that lockdown rules remain effective in Sierra Leone for as long as epidemiologists deem necessary, they need to design such measures with a multidisciplinary approach enlisting the help of psychologists, economists, and technologists. To maximise compliance, the social cost of the lockdown in terms of mental illnesses and emotional distress must not be higher than that of the damage the lockdown is preventing.

The recent lockdown rules in Germany, the United Kingdom, and Belgium, for example, which allow people to go for a walk or a jog but ban public gatherings of more than two people, may be tolerated for a month or two. By contrast, the total lockdowns in France, Italy, and Spain will work only for much shorter periods. This is largely because these lockdowns involve the most significant restrictions on freedom of movement with huge economic and social impacts. Yet, aside of the well-known, devastating impact of these lockdown measures, they also have deep political implications which are not pertinent in authoritarian regimes, where civil liberties are not of paramount concern to the state. The price that democracies pay in terms of sacrificing our freedoms is a high one. A final problem with these national lockdowns is that, by their very nature, they have no 'exit' strategy: their 'containment' or 'mitigation' of the virus is effected through enforcing a change in public behaviour (with huge economic, social and political costs), which can help slow the spread as long as that change in behaviour continues to be enforced. National lockdowns are not therefore sustainable in the long-term either in terms of their effectiveness or their side-effects.



2- Building a healthy lockdown model

Building healthy elements into lockdown approaches improves people's ability to cope and comply with the rules for longer periods. It gives governments more time to build the necessary responses against the virus. Such provisions may even encourage better habits among the population, as well as businesses, in the long run.

While it would be irresponsible to relax lockdown rules prematurely, blanket or partial lockdowns,

including prohibitions on all outdoor activities, night curfew and readjustment of official working hours may be counterproductive. This is mainly because, these measures increase the psychological and economic costs of compliance for people and governments alike. People's patience will start to run out – especially as their financial resilience declines – and the cost of enforcement will increase.

Yet, many economic activities, particularly those involving skilled or semi-skilled workers could still be pursued while observing social-distancing protocols. By introducing rules that combine a viable level of economic and social activity with strict "social distancing" policing, governments can help to boost the financial and mental resilience of targeted communities. This is especially important given that lockdowns are affecting the poor more adversely than the wealthy, and look set to be long-lasting.

Moreover, for many people in Sierra Leone like many other developing countries, staying at home means staying without income. Such fragile communities have minimal financial resilience and thus are highly unlikely to comply with lockdown measures aimed at halting the pandemic – and there is little that governments can do if they are faced with a massive backlash. This poses an additional risk to national and global healthcare. Rapid testing on a massive scale will be instrumental in tackling the pandemic in communities in Sierra Leone and until an effective vaccine is within reach.



3- Championing the campaign against COVID-19

As policymakers in Sierra Leone work to combat the spread of Covid-19 pandemic, they find themselves in an uncharted territory. Specifically, while Sierra Leone continues to implement approaches of social distancing and retail shop closures, it needs to be much more proactive towards the containment of the virus. The following are some strategic alternatives the government can take into consideration to ensure that it guides Sierra Leoneans to collaborate effectively to contain and eradicate the virus from the country.

- Ensure the extensive testing of symptomatic and asymptomatic cases.
- Engage in the proactive tracing of potential positive cases. If someone is tested positive, everyone in that patient's home as well as their neighbours must be tested. If testing kits are unavailable, they must be self-quarantined.
- Lay a strong emphasis on home diagnosis and care. Whenever possible, samples should be collected directly from a patient's home and processed in regional and local hospital labs.
- Enhance efforts to monitor and protect health care and other essential workers. These include medical professionals, those in contact with at-risk populations (e.g., caregivers in nursing homes), and workers exposed to the public (e.g., supermarket cashiers, pharmacists, and protective services staff).
- Design and implement compressive and systemic solutions by issuing a series of decrees that gradually increases restrictions within lockdown areas ("red zones"), which can expanded and ultimately applied to the entire country.
- Learn from both successes and failures and the willingness to change actions accordingly. Certainly, there are valuable lessons to be learned from the approaches of China, South Korea, Taiwan, and Singapore, which we can use to be able to contain the contagion fairly early.
- Develop e behaviour change communication strategy to facilitate the collection, analysis and dissemination of credible data on COVID-19 to the public.



4- Containing the sporadic COVID-19 pandemic

Therefore, containing the COVID-19 pandemic now requires a wide range of other inclusive and sustainable interventions. This could include, the production of more ventilators and other medical equipment for public hospitals including for intensive-care units, to making accurate diagnostics and effective therapeutics widely available.

While research and development of a COVID-19 vaccine according to the WHO will require a considerable amount of time and will be extremely expensive to procure by impoverished countries including Sierra Leone, the government still needs the required technology to introduce, monitor, and enforce smart social-distancing rules, in the form of GPS, drones, big data, and various mobile technologies. In fact, we need the technology to create temporary designated “Covid-19 Free Zones” within villages, communities, towns and cities, with movement in and out being restricted. Such zones can first be created around government and health-care institutions and subsequently expanded gradually to encompass entire cities, then to towns and villages.

Banning all outdoor activities for extended periods of time is the least innovative solution. It could give rise not only to mental-health disorders, but also

to physical sicknesses, domestic violence, sexual exploitation and abuse, economic exclusion and family breakdown. A case in point was the alleged case of sexual abuse and exploitation against girls and young women in a COVID-19 quarantine home in Port Loko district, [jointly reported by Defence for Children International and the Amazonia Initiative Movement.](#)

Lockdown rules should isolate violators, not the general public, and social distancing should not mean home detention. Blanket or partial COVID-19 lockdowns may feel like a collective act of caution and responsibility for now; but the longer they last, the more they are likely to feel like a collective punishment for violations committed by a minority. Such draconian measures threaten to diminish public morale and make compliance much more difficult.

Finally, the need for immediate action and for massive mobilisation imply that an effective response to this crisis will require a decision-making approach that is far from business as usual. If policymakers want to win the war against Covid-19, it is essential to adopt an approach that is systemic, prioritises learning, and can quickly scale up successful experiments and identify and abolish the ineffective ones. Yes, this is a tall order — especially during such an enormous crisis. But given the stakes, it must be done.

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